

Economic Development Incentive Program (EDIP) ECONOMIC OPPORTUNITY AREA (EOA) DESIGNATION APPLICATION

A complete application with all required attachments must be submitted in electronic form to your MOBD Regional Director by 5:00 P.M. on the <u>application deadline date</u>. A hardcopy with original signatures and attachments must be postmarked no later than 1 day after the submission deadline and mailed to: EDIP Manager, MOBD, 10 Park Plaza, Suite 3730, Boston, MA 02116. **Applications that are incomplete or submitted after the deadline will not be considered at the scheduled Economic Assistance Coordinating Council (EACC) meeting, without exception.**

PART I. PROPOSED EOA				
1. DESIGNATION OVERVIEW				
Name of Proposed EOA: NBCUniversal Media				
Municipality:	Town of Needham			
EOA Designation is for:	New EOA within a previously approved Economic Target Area Amendment to a previously approved EOA			
The area is being proposed for designation as the applicable parcels meet the eligibility criteria (see definitions as defined in M.G.L. Chapter 121A, §1 and M.G.L. Chapter 23A §3E):	☑ Blighted Open Area☐ Decadent Area☐ Substandard Area☐ Cumulative Job Loss			
Effective Time Period for EOA Designation (Designation must remain in effect for a minimum of 5 Years and Maximum of 20 Years)	10 Years			
2. EOA BOUNDARIES				
(a) Attachment A: Map of Proposed EOA Please attach a detailed map of the proposed EOA, indicating the existing streets, highways, waterways, natural boundaries and other physical features. Attached				
(i) Please provide a detailed description of the EOA boundaries including parcel numbers and how said area conforms to the definition of either "Blighted Open Area", "Decadent Area", "Substandard Area and/or "Cumulative Job Loss" as marked in section 1.				
See attached continuation pages.				

3. REASON FOR DESIGNATION

(a) Please describe the reason for the proposed EOA Designation. Please include:

- (i) A brief narrative of why the EOA designation is important to the community.
- (ii) If a business has indicated an intention to locate or expand within the proposed EOA, please provide the name and brief description of the company. If applicable, attach the letter of intent.

See attached continuation pages.

(b) Please describe the economic development goals for the proposed EOA during the first five years of EOA designation.

See attached continuation pages.

PART II. MUNICIPAL DESIGNATION PROCESS						
1. MUNICIPAL AUTHORITATIVE REVIEW						
EOA Authoritative Review Municipal Official or Board/Council/Etc.	Town Manager					
Municipal Contact:	Full Name:		Kate Fitzpatrick	Title:	Town Manager	
Contact Address:	Street Address:		1471 Highland Avenue			
Contact Address.	City:	Needha	m	MA	Zip Code:	02492
Telephone Number:	781-455-7500					
Email Address:	KFitzpatrick@needhamma.gov					

(a) Indicate the local standards and procedures for review of project proposals including:

- (i) the application procedures,
- (ii) the timeframe for review and determination
- (iii) and the criteria and process for approval of project proposals
- (iv) Attachments of any additional documentation required (if applicable)

See attached continuation pages.

2. LOCAL APPROVAL STREAMLINING

(a) Provide a proposal and plan (or attach existing plan) to increase the ease of doing business by streamlining delivery of local services within the EOA such as the municipality's permit, approval and license procedures. See: "Best Practice Model for Streamlined Local Permitting"

See attached continuation pages.

(b) Compliance with Community Reinvestment Act: Include a copy of a municipal plan or policy, if any exists, which links the municipality's choice of banking institutions to the bank's compliance with the requirements of the Community Reinvestment Act.	☐ Attached ☑ N/A			
PART III. SPECIAL REQUIREMENTS FOR LARGE MUNICIPALITIES				
This section must be completed by any municipality <u>or member of a regional ET</u> population that exceeds fifty thousand (50,000) people. The population threshold calculated based on the most recent statistics available from the U.S. Bureau of the complete	d should be			
Please check appropriate selection: ☐ Municipality or regional ETA population exceeds 50,000 people (if checked, please of below Part III). ☐ Municipality or regional ETA population is less than 50,000 people (if checked, Part required, please skip to Part IV.)	-			
1. MUNICIPAL INFRASTRUCTURE SUPPORT				
Provide an analysis of the existing infrastructure support and municipal services, including transportation access, water and sewer hook-ups, lighting, and fire and police protection certified projects within the proposed EOA(s). Indicate if the existing level of services infrastructure is adequate to support the anticipated development in the proposed EOA	on to and for es and			
Provide a proposal for meeting additional demand for municipal services and infrastructure improvement, including costs and funding sources available for these improvements.				
N/A				
2. JOB TRAINING PROGRAMS				
Describe the municipality's plans to secure access to publicly or privately sponsored t for employees of certified projects and for residents of the municipality/ETA.	raining programs			
N/A				
3. LOCAL COMMUNITY INVOLVEMENT				
Describe the municipality's plans to increase the level of private sector involvement a involvement by community development organizations in the economic revitalization proposed for designation. For example, local involvement could include commitmen persons to provide jobs and job training to residents or to employees who for certified proposed EOA(s).	of the area ts from private			

N/A

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The municipality completing this application must provide a **binding written offer** to provide either tax increment financing or a special tax assessment to each certified project located within the proposed EOA(s).

Please attach a copy of the municipality's binding written offer.

- (i) **In cities**, this shall be in the form of a City Council Order or Resolution, along with a Certified Vote by the City Clerk.
- (ii) In towns with Town Meeting form of government, this shall be in the form of a Town Meeting Motion, along with a Certified Vote by the Town Clerk.
- (iii) In towns with Town Council form of government, this shall be in the form of a Town Council Order or Resolution, along with a Certified Vote by the Town Clerk.

\square	Attached
IXI	Attachea

PART V. APPLICATION AUTHORIZATION, CERTIFICATION & ACKNOWLEDGEMENT

I/We _____ (fill in name and title) of the applicant municipality applying for "Economic Opportunity Area" Designation from the Commonwealth of Massachusetts, Economic Assistance Coordinating Council hereby certify that I/we have been authorized to file this application and to provide the information within and accompanying this application and that the information provided herein is true and complete. I/we understand that the information provided with this application will be relied upon by the Commonwealth in deciding whether to approve "Economic Opportunity Area" Designation and that the Commonwealth reserves the right to take action against the applicant or any other beneficiary of the Economic Opportunity Area if the Commonwealth discovers that the applicant intentionally provided misleading, inaccurate, or false information. I/we make this certification under the pains and penalties of perjury.

The signatories also hereby acknowledge that, under the Public Records law of the Commonwealth of Massachusetts, this application and all documents submitted in support thereof are public records under the provisions of Massachusetts G. L., Ch. 4, sec. 7 (26).

Signed:			
		Select mm/dd/yyyy	
Name	Title	Date	
		Select mm/dd/yyyy	
Name	Title	Date	